

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A21188**

1. Entity Name
DEER CHASE ASSOCIATES, LTD.



Principal Place of Business
7321 SHADELAND STATION, #220
INDIANAPLOIS IN 46256

Mailing Address
7321 SHADELAND STATION, #220
INDIANAPLOIS IN 46256

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business Suite, Apt. #, etc. 3. Mailing Address Suite, Apt. #, etc.

City & State City & State 4. FEI Number **35-1654002** Applied For Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

ROBBINS, DEBORAH A
4400 N.W. 6TH STREET
DEERFIELD BEACH FL 33442

Name **Thomas F. Pechette**
Street Address (P.O. Box Number is Not Acceptable)
10 Ironwood Way North
City **Palm Beach Gardens FL** Zip Code **33418**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Thomas F. Pechette* 04-15-2003
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. **\$1,427,500.00** 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO FL DEPT OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	B9700000137	STREET ADDRESS	300016662443
NAME	MARK III DEVELOPMENT GROUP, LTD.	CITY-ST-ZIP	04/22/03 01042 008 #43750
STREET ADDRESS	7321 SHADELAND STATION, #220	STREET ADDRESS	07/17/03--01057--004 **88.75
CITY-ST-ZIP	INDIANAPLOIS IN 46256	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Thomas F. Pechette*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04-16-2003
Date Daytime Phone #